

# MEDICAL OBSERVATION FOLLOWING USE OF FORCE

EXHIBIT

G

R. [REDACTED] D.O.B. 4/15/72 incarcerated at the Suffolk County ☐ JAIL ☒ H.O.C.

X Was treated  
\_\_\_\_ Refused treatment  
\_\_\_\_ No treatment required

by the physician and / or the nurses of the above named institution following the use of force on

5/19/03

(date)

[Signature]

Medical staff signature

Comments: CAROL, S/P USE OF FORCE, BROUGHT TO  
INPATIENT ON MWA. C/O (L) BEAR PAW, LARGE BRUISE  
TO ANTERIOR BEAR PAW ON PALPATION. EVALUATED BY  
PA BRINKLEY. ICE, MOTREI GEL, NO OTHER INJURIES  
OBSERVED OR COMPARED OF. [REDACTED] END OF REPORT

000667